PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address:

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required,) Backet I through 5 should be completed where appropriate All Interts correspondence including the Patent, advance orders and antification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee antifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must

	7590 02/2:	/2009		na	e its own certificat	e or ma	iling or transmission.	
Thelen-Reid-& - PO-Box-640640 San Jose, CA 951	Priest 64-0640	2305		I h Ste ade tra	Ce ereby certify that the tes Postal Service fressed to the Ma asmitted to the USI	rtificate his Fee(with sul il Stop PTO (57	e of Mailing or Trans s) Transmittal is being ficient postage for fire ISSUE FEE address 1) 273-2885, on the d	mission g deposited with the United at class mail in an envelope above, or being facsimile ate indicated below.
NIXON PEABOD	1 Road, 2nd	C1						(Depositor's name)
Palo Alto, C		or-	L				(Signature)	
1410 11100,,0	N 34300			L				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVES		R	ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/528,436	03/18/2005			Gerard Petroz		034299-626 4303		
TITLE OF INVENTION: COMPOUND OF THIS M	METHOD FOR MA IATERIAL	NUFA	CTURING ELEC	TRODES ON A SEMIC	ONDUCTING MA	TERIA	L OF TYPE II-VI	OR ON A
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE		PUBLICATION FEE DUE	PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO		\$1510	\$300	\$0		\$1810	05/26/2009
EXAMINER		ART UNIT		CLASS-SUBCLASS	1			
PHAM, THANHHA S			2894	438-603000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.35). Change of correspondence address for Change of Correspondence Address for PIO/SB/12) attached. "Fee Address" indication for "Fee Address" Indication form PIO/SB/12 attached. "Tee Address" indication for Tee Address" Indication form PIO/SB/12 attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member of registered attorney or agent) and the names of up to 2 registered attorney or agent) and the names of up to 3 registered attorney or agent of the name is up to 3 registered attorney or agent of the name is up to 3 registered attorney or agent of the name is up to 3 registered attorney or agent of the name is up to 3 registered attorney or agent of the name is up to 3 registered attorney or agent of the name is up to 3 registered attorney or agent of the name of the na				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE COMMISSARIAT A L'ENERGIE ATOMIQUE PARIS, FRANCE Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Occupantion or other private group entity Occurrence.								
4a. The following fee(s) are submitted: 1 Issue Fee 2 Publication Fee (No small entity discount permitted) 2 Advance Order - # of Copies 4				b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) \[\begin{align*} \text{Lock is enclosed.} \end{align*} \] Payment by credit card, Form PTO-2038 is attached. \[\begin{align*} \text{In the Director is hereby subtorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number \(\begin{align*} \text{Director is an extra copy of this form).} \end{align*} \]				
5. Change in Entity Statu	SMALL ENTITY state	s. See	37 CFR 1.27.	, b. Applicant is no lor				
NOTE: The Issue Fee and interest as shown by the je	Publication Fee (if red cords of the United Sta	sired) (vill not be accepted	from anyone other than	the applicant; a reg	istered a	ittorney or agent; or th	e assignee or other party in
Authorized Signature) (O)	75	ebs X	W	_{Date} Ma	-	1, 2009 5,885	
Typed or printed name					Registration N	NO		
This collection of informat an application. Confidentis submitting the completed this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 22313	ion is required by 37 C dity is governed by 35 application form to the as for reducing this but ginia 22313-1450. DC 3-1450.	FR 1.3 U.S.C. USPT den, sh NOT	II. The information 122 and 37 CFR O. Time will vary tould be sent to the SEND FEES OR O	on is required to obtain or 1.14. This collection is es depending upon the indi- e Chief Information Offic COMPLETED FORMS T	retain a benefit by t timated to take 12 vidual case. Any co er, U.S. Patent and O THIS ADDRESS	the publ minutes omment Traden S. SENI	ic which is to file (and to complete, includin s on the amount of tin ark Office, U.S. Depa of TO: Commissioner f	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O. or Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

OMB 065I-0033